

COHEN, PONTANI, LIEBERMAN & PAVANE

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10176-1022

TELEFAX TRANSMITTAL

July 22, 2002

To: **Ms. Francine Young**
U.S. Patent and Trademark Office

Fax#: 703-746-6713

From: **Michael C. Stuart, Esq.**
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Re: U.S. Patent Application No. 10/049,894
Our File: 4925-212-PUS

3 Pages Follow This Cover Sheet

If all pages are not received
or you otherwise experience transmission difficulties
Please call us at 212-687-2770

- ☐ Confirmation will follow
☒ Confirmation will not follow

Dear Ms. Young:

Thank you for your call today. Following, as you requested, is a complete copy of the executed declaration for the above-identified application. If you need anything further regarding this case, please call me.

Michael Stuart

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)				Attorney's Docket No. 4925-212PUS	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:					
U.S. APPLICATIONS			STATUS (check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			
PCT/FI01/00599	25 June 2001			x	
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (<i>List name and registration number</i>) MYRON COHEN, Reg. No. 17,358; THOMAS C. PONTANI, Reg. No. 29,763; LANCE J. LIEBERMAN, Reg. No. 28,437; MARTIN B. PAVANE, Reg. No. 28,337; MICHAEL C. STUART, Reg. No. 35,698; KLAUS P. STOFFEL, Reg. No. 31,668; EDWARD WEISZ, Reg. No. 37,257; VINCENT M. FAZZARI, Reg. No. 26,879; JULIA S. KIM, Reg. No. 36,567; ALFRED FROEBRICH, Reg. No. 38,887; ALFRED H. HEMINGWAY, JR., Reg. No. 26,736; KENT H. CHENG, Reg. No. 33,849; YUNLING REN, Reg. No. 47,019; ROGER S. THOMPSON, Reg. No. 29,594; BRICE FALLER, Reg. No. 29,532; DAVID J. ROSENBLUM, Reg. No. 37,709; TONY CHEN, Reg. No. 44,607; ELI WEISS, Reg. No. 17,765; TEODOR J. HOLMBERG, Reg. No. 50,140.					
Send correspondence to: Michael C. Stuart Reg. No. 35,698 Cohen, Pontani, Lieberman & Pavane 551 Fifth Avenue, Suite 1210 New York, New York 10176			Direct Telephone calls to: (name and telephone number) Michael C. Stuart (212) 687-2770		
201	FULL NAME OF INVENTOR	FAMILY NAME ISOKANGAS	FIRST GIVEN NAME Jari	SECOND GIVEN NAME	
	RESIDENCE, CITIZENSHIP	CITY Tampere	STATE OR FOREIGN COUNTRY Finland	COUNTRY OF CITIZENSHIP Finland	
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202	FULL NAME OF INVENTOR	FAMILY NAME SARKKINEN	FIRST GIVEN NAME Sinikka	SECOND GIVEN NAME	
	RESIDENCE, CITIZENSHIP	CITY KANGASALA Tampere	STATE OR FOREIGN COUNTRY Finland	COUNTRY OF CITIZENSHIP Finland	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Aittakatu 6 D-18 KISALINKUA 5	CITY Tampere KANGASALA	STATE & ZIP CODE/COUNTRY 36200 FIN-33560 Finland	

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
Includes Reference to PCT International ApplicationsAttorney's Docket
No. 4925-212PUS

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TRANSMISSION METHOD FOR PACKET DATA AND A NETWORK ELEMENT

the specification of which (check only one item below)

☐ is attached hereto☐ was filed as United States application

Serial No. _

on _

and was amended

on _ (if applicable).

☒ was filed as PCT international applicationNumber PCT/FI01/00599on 25 June 2001

and was amended under PCT Article 19

on _ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of the application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

PRIOR FOREIGN/PCT APPLICATIONS AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

Country (if PCT, indicate "PCT")	Application Number	Date of Filing (day, month, year)	Priority Claimed Under 35 U.S.C. 119	
Finland	20001509	26 June 2000	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
PCT	PCT/FI01/00599	25 June 2001	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO